## **Classification and Referral Algorithm**

Assessment	Classification	Referral	Treatment and Advice
<ul> <li>Ask, look and feel for Danger Signs:</li> <li>1. Convulsions</li> <li>2. Very sleepy / not able to wake</li> <li>3. Chest in-drawing</li> <li>4. Vomiting everything</li> <li>5. Not able to drink or breastfeed</li> <li>6. Neck stiffness</li> </ul>	If 1 or more danger signs is present classify as a <b>danger sign</b>	Give RED triangle and refer immediately to PHCU/C	Give pre-referral treatment as indicated below if child is able to swallow.
Ask, look and feel for signs of <b>Fever</b>	If present <u>with 1 or more</u> <u>danger sign</u> classify as <b>severe malaria</b>	Give RED triangle and refer immediately to PHCU/C	Treat with <b>AS +AQ.</b> Give first dose before referral.
	If present for <u>7 days or</u> <u>more</u> classify as <b>severe</b> malaria	Give YELLOW triangle and refer to PHCU/C	Treat with <b>AS +AQ.</b> Give first dose before referral.
	If present for <u>less than 7</u> <u>days</u> classify as <b>uncomplicated malaria</b>	Do not refer	Treat with <b>AS +AQ.</b> Give first dose DOT. Counsel caregiver on home treatment.
Ask, look and feel for signs of <b>Fast</b> <b>Breathing and</b> <b>Cough</b>	If present with <u>chest in-</u> <u>drawing</u> classify as <b>severe pneumonia</b>	Give RED triangle and refer immediately to PHCU/C	Treat with <b>amoxicillin.</b> Give first dose before referral.
	2-11 months: 50 or more breaths per minute classify as <b>pneumonia</b>	Do not refer	Treat with <b>amoxicillin.</b> Give first dose DOT.
	1-5 years: 40 or more breaths per minute classify as <b>pneumonia</b>		Counsel caregiver on home treatment.
	If cough is present without fast breathing or difficulty breathing classify as <b>common</b> <b>cold</b>	Do not refer	Do not treat. Advice caregiver to continue breast feeding or give a child plenty of water and other fluids.

Assessment	Classification	Referral	Treatment and Advice
Ask, look and feel for signs of <b>Diarrhoea</b> and Dehydration	If present <u>with 1 or more</u> <u>danger signs or with</u> <u>severe dehydration</u> classify as <b>severe</b> <b>diarrhoea</b>	Give RED triangle and refer immediately to PHCU/C	Treat with <b>ORS</b> solution. Advice caregiver to give prepared solution on the way to referral site.
	If 3 or more watery stools a day <u>for 14 days</u> <u>or more,</u> classify as severe diarrhoea	Give YELLOW triangle and refer to PHCU/C	Treat with <b>ORS and</b> <b>Zinc.</b> Advice caregiver to give prepared solution
	If <u>bloody diarrhoea</u> is present classify as <b>severe diarrhoea</b>		on the way to referral site. Advice caregiver to continue breast feeding or give a child plenty of water and other fluids.
	If 3 or more watery stools a day for <u>less than</u> <u>14 days</u> classify as moderate <b>diarrhoea</b>	Do not refer	Treat wit <b>ORS and</b> <b>Zinc.</b> Give first dose Zinc and prepared ORS solution DOT. Advice caregiver to continue breast feeding or give a child plenty of water and other fluids. Counsel caregiver on home treatment.
Ask, look and feel for signs of <b>Severe</b> Acute Malnutrition(SAM)	If MUAC tape reading is RED (less than 115 mm or 11.5 cm) classify as <b>SAM</b>	Give MALNUTRITION triangle and refer to OTP site	Give pre-referral treatment for malaria and pneumonia with AS+AQ and amoxicillin.
	If pitting oedema is present in both feet classify as <b>SAM</b>		Do NOT give ORS or Zinc tablets even if diarrhoea is present. Advice caregiver to inform the provider at the OTP site about medicines given.